Request For Private Pesticide Applicator Data

Requests for data listings must be made **in writing** and mailed (or fax'd) to:

Pesticide Bureau -- Iowa Department of Agriculture & Land Stewardship
Henry A. Wallace Building -- Des Moines, IA 50319
FAX 515/242-6497
Voice: 515-281-4339

REQUEST MADE BY AND BILLING TO BE SENT TO: (Please type or print legibly)

Company Name								
Attention					Telephone Number w/Area Code			
Address								
City, State, Zip + 4		email address						
I am requesting a printout (an expiration dates of Certified lunderstand that I will be billed, necessary to generate said liadhesive labels are billed at the without notice.	Privat and a sting.	e Pesticide Applicators gree to pay promptly on (There are approximate	current receipt content ely 28 r	tly on re of the list ecords	ecord for the ing, \$1.00 per page for p	followir page fo printed l	ng counties. r data services istings.) Self-	
Signature:Date:								
PLEASE SELECT:								
Counties Requested:		☐ Iowa Records Only			☐ Out-of-State Records Only			
		☐ Specified Counties Only (List Counties Below)			☐ Both Out-Of-State and Iowa Records			
a.		b.		C.				
d.	e.			f.				
Provide List On:		☐ Self-Stick Labels ☐ Star		Standa	ndard Printout □ Both Labels & Printout			
			3½" Disks - Format (_ one) : □DBF Fo			Length		
O and O a manage of Other and Only	. 0	<u> </u>						
Sort Sequence: (Choose Onl Alpha by Firm	y One	<u> </u>		Zip Co	de		License Number	
Intended Purpose: Please ex	kplain	in detail exactly how this	data is (going to	be used.			
·	·	<u> </u>						

Please do not write in shaded areas. The listing requested above is authorized for release, to the individual and company listed above.	PD number & Exp Date	Authorizing Signature/Pesticide Bureau/IDALS Date
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